

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	W A	12	06/10/01
O.I.P.E. CLASSIFIER		12	01/10/01
FORMALITY REVIEW	BZ	IC3-883	08-02-01
RESPONSE FORMALITY REVIEW	CC	IC1114	10-11-01

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Original	Date
1	✓	
2	✓	
3	✓	
4	✓	
5	✓	
6	✓	
7	✓	
8	✓	
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43	✓	
44	✓	
45	✓	
46	✓	
47	✓	
48	✓	
49	✓	
50	✓	

Claim	Original	Date
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Claim	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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10-11-01  
10-11-01  
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